

# **2009 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A02000001671

**FILED**  
**Jan 24, 2009**  
**Secretary of State**

**Entity Name:** GONZALES FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

7350 SANDLAKE COMMONS BLVD.  
SUITE 3322  
ORLANDO, FL 32819

**New Principal Place of Business:**

7400 DOCS GROVE CIRCLE  
ORLANDO, FL 32819

**Current Mailing Address:**

7350 SANDLAKE COMMONS BLVD.  
SUITE 3322  
ORLANDO, FL 32819

**New Mailing Address:**

7400 DOCS GROVE CIRCLE  
ORLANDO, FL 32819

**FEI Number:** 59-3546078

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

W & P SERVICES, INC.  
450 N. WYMORE ROAD  
WINTER PARK, FL 32789 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #: L02000030892  
Name: P & M GONZALES, LLC  
Address: 7350 SANDLAKE COMMONS BLVD.  
City-St-Zip: ORLANDO, FL 32819

**ADDRESS CHANGES ONLY:**

Address: 7400 DOCS GROVE CIRCLE  
City-St-Zip: ORLANDO, FL 32819

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: PATRICK P GONZALES

MD

01/24/2009

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date